



**BRITISH CAR COUNCIL INC**  
**Membership & Renewal Form / Invoice**  
 (please print clearly)

**April 30, 2020**

**[This Form Becomes Your Invoice Once Completed]**

Club Name: \_\_\_\_\_

Club Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Club Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Club Web Site: \_\_\_\_\_

BCCI Representative: \_\_\_\_\_

Rep Address: \_\_\_\_\_ Rep Phone: \_\_\_\_\_

\_\_\_\_\_ Rep Fax/Cell: \_\_\_\_\_

Rep E-mail: \_\_\_\_\_

**Fee Calculation & Invoice Amount**

Basic Annual Club Membership to BCCI (May 2020 through April 2021) \$ **40.00**

Additional Insurance 'Per Club Member' Fee \* \_\_\_\_\_ X \$1.50 per member \$ \_\_\_\_\_

(enter the number of members in the club at the end of the last calendar year here  $\uparrow$  then multiply by 1.5 and enter the amount here)  $\uparrow$

\* The 'CLASSIC & ANTIQUE AUTO CLUBS INSURANCE FORM' and the 'DIRECTORS & OFFICERS LIABILITY INSURANCE FORM' must be completed or adequate proof of insurance must be provided.

**Total Amount Due:** (add the basic membership & the additional fee & enter the total due) \$

**This Form Becomes Your Renewal Invoice Once Completed**

**Complete this form in black ink and return it along with your payment to:**  
 (cheques payable to British Car Council Inc)

**British Car Council**  
**[ President ]**  
**1315 Kilmarnock Road**  
**Jasper, Ontario**  
**K0G 1G0**

**AN ADMINISTRATION FEE OF \$50 WILL BE CHARGED ON LATE RENEWALS (after the Annual General Meeting)**

# CLASSIC AND ANTIQUE AUTO CLUBS INSURANCE FORM (2020)

[ limit of liability: \$5 million ]

Name of Club: \_\_\_\_\_

Club Contact Name: \_\_\_\_\_

Club Contact Address: \_\_\_\_\_

Year Club Started: \_\_\_\_\_ [YYYY] Current Number of Members: \_\_\_\_\_ [include all members, directors, officers]

List subsidiary clubs if any: \_\_\_\_\_ [subsidiary or other clubs that report to your club]

Types of Vehicles Unique to the Club: \_\_\_\_\_ [list Marques or generic groups included; not individual models]

Types of Events Attended: \_\_\_\_\_ [ie: automobile display, technical session, cruise night gathering, skills display, funkhana, club meeting, flea market, swap meet, hobby gathering, etc]

Number of Events Attended Annually: \_\_\_\_\_ Usual Location of the Events: \_\_\_\_\_ [meetings & other events] [restaurants, city parks, fairgrounds, parking lots, other]

Does the club host events outside the Province or outside Canada and do you host events there? Yes \_\_\_ No \_\_\_  
If yes, describe in detail \_\_\_\_\_ [attending an event is NOT Hosting an event. Check Yes only if you actually Host an event outside the Province or country]

Does the club travel outside the Province? Yes \_\_\_ No \_\_\_ If yes, where? \_\_\_\_\_ [if yes, identify the Province and / or States]

Does the club have fundraisers? Yes \_\_\_ No \_\_\_ If yes, what kind \_\_\_\_\_ [other than annual fees or dues from members] [for charitable donations, for special programs, others?]

Does the club participate in other activities? Explain: \_\_\_\_\_ [as a club at sports events, charity support, auctions, volunteer work, etc, not related to the club automotive activity]

## DIRECTORS & OFFICERS LIABILITY INSURANCE FORM

1) Legal Structure \_\_\_\_\_ [Corporation, Business Association, Not-For-Profit Group, Community Association, Not Incorporated, Foundation, Registered Society, other]

2) Limit of liability requested: \$2,000,000.

3) The officer designated to receive any and all notices from the insurer or their representatives concerning this insurance:

Name: \_\_\_\_\_  
Mailing address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

4) Size of operating budget (revenue plus cash assets)

Current year: \$ \_\_\_\_\_

Anticipated for next year: \$ \_\_\_\_\_

Annual Dues from members: \$ \_\_\_\_\_

Estimated donations/contributions from the general public: \$ \_\_\_\_\_

5) Number of: Directors \_\_\_\_\_ Officers \_\_\_\_\_ Volunteers \_\_\_\_\_ Members \_\_\_\_\_  
[Executive group members] [non-Executive group officials] [non-paid / non-member] [identifiable members]

6) List all affiliated organizations & related groups: \_\_\_\_\_ [other clubs and organizations that your club reports to]

7) How frequently does the Board of Directors meet? \_\_\_\_\_ [weekly, monthly, quarterly, annually, other]

8) Does each Director have a formal job description, clearly defining their scope of duties? Yes \_\_\_ No \_\_\_

9) In the past 5 years, has similar insurance been declined, cancelled, non-renewed or refused? Yes \_\_\_ No \_\_\_

10) Does the organization or any other person(s) proposed for this insurance have knowledge or information of any actual or alleged negligent act, error, omission, misstatement or misleading statement or breach of duty which might give rise to a future claim? If yes, provide details on back. Yes \_\_\_ No \_\_\_

Club Representative  
Name & Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\* Complete This Form In Black Ink And Return It To BCCI \*\*\*\*\*